POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	DT		10-24-00
O.I.P.E. CLASSIFIER	-51		, , , , , , ,
FORMALITY REVIEW		· · · · · · · · · · · · · · · · · · ·	
RESPONSE FORMALITY REVIEW		64694	11-21

INDEX OF CLAIMS

~	Rejected	N	Non-elected
`=	Allowed	- 1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

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Claim Date	Claim	Date	Claim	Date				
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If more than 150 claims or 10 actions staple additional sheet here